

CITY OF HARTFORD

TEMPORARY FOOD EVENT COORDINATOR'S APPLICATION

This form with remittance of \$50.00 (CASH ONLY) must be filed 30 days prior to the opening event. Bring application and cash to the Department of Licenses and Inspections, 260 Constitution Plaza, Hartford, CT. 06103. This form is not a license. Temporary food permits will not exceed a period of 1 to 5 days.



CITY OF
HARTFORD
Health Department

Environmental Health Division
131 Coventry Street, Hartford, CT 06112
Telephone: 860-543-8815 Fax: 860-722-6719

Name of Event _____ Date(s) of Event _____
Event Location _____
Event Hours _____ Number of Food Vendors _____
Vendor Inspection Time _____ (minimum of 1 hour prior to Event Opening Time)

EVENT COORDINATOR

NAME _____ ADDRESS _____ CELLULAR PHONE _____ HOME PHONE _____

ON-SITE COORDINATOR(S)

NAME _____ * QFO? _____ CELLULAR PHONE _____ BEEPER NUMBER _____

List of Vendors

*Each vendor must complete the Temporary Food Event Vendor Application. (see attached form)
Applications not received ten days prior to the event will not be accepted and the vendors will not be
allowed to open for business.*

*All permits for food service are issued subject to passage of an onsite inspection by the Hartford Health
Department. The Event Coordinator must make arrangements 5 days in advance with the Health
Department to determine the time of pre-opening inspections.*

I will comply with the CT Public Health Code and the Hartford Municipal Code

Signature of Event Coordinator: _____

Date: _____

Name of Qualified Food Operator: _____ Cellular Phone: _____

(Attach copy of QFO certificate to application)